

Delaware Department of

Human Resources

Benefits Made Easy Statewide Benefits Office

Open Enrollment 2020 FAQs

May 4 - 20, 2020

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For more information, visit de.gov/statewidebenefits (select "Open Enrollment")

Q: Do I have to actively participate in Open Enrollment?

Per legislation, employees of the State of Delaware, which includes all State Agencies, DOE, K12 (School Districts and Charter Schools), DTCC & DSU, are **required to actively participate** in the Open Enrollment process each year. Employees who **Step Up During Open Enrollment** and **actively participate** between May 4 – 20 by completing three simple steps (view the **Enrollment Action Checklist** to learn more) will meet the requirements to actively participate. Even if you do not want to make any changes to your benefits and just keep what you currently have (or continue to waive coverage), during Open Enrollment you **must** look at Benefits Enrollment in State of Delaware Employee Self-Service, select "I Confirm My Selections" and click **Submit** to send your final benefit choices for the July 1, 2020 plan year. Also, employees who wish to continue to cover their spouse on their health (Highmark Delaware or Aetna) plan effective July 1, 2020, must complete the online Spousal Coordination of Benefits Form during Open Enrollment.

Whether you are at work or home, all of these steps are available online, 24/7 and easily accessible via computer, tablet or mobile device.

Q: Will there be benefit plan premium (rate) changes for 2020?

The benefit plan premiums (rates) for the State dental and vision plans will increase effective July 1, 2020. While there are no rate increases for the health plans as of July 1, 2020, the State Employee Benefits Committee (SEBC) continues to closely monitor healthcare expenditures in the State Group Health Insurance Plan. Should it be necessary to increase rates during the course of the plan year, employees enrolled in a health plan will have the opportunity to make changes. Details will be communicated as they become available. Dependent (spouse and/or child(ren)) term life rates under the State Group Universal Life Insurance Plan will increase effective July 1, 2020. Learn about these changes by viewing the online informational courses or visiting the SBO website (select "Open Enrollment").

Q: When will the coverage changes take effect?

The coverage changes and rates, including enrollment or cancellation of coverage, will take effect on **July 1, 2020**.

State of Delaware employees are paid on a lag basis meaning that the first deduction for new coverage or changes to coverage beginning July 1, 2020 will be taken from the **July 17, 2020** paycheck.

Note: The first FSA deduction will be taken from the July 3, 2020 paycheck.



Q: What are the resources to help me complete Open Enrollment?

There are several tools on the <u>SBO website</u> (select "Open Enrollment") to help you actively participate in Open Enrollment and be a wise healthcare consumer:

- Enrollment Action Checklist Document provides the required steps for completing Open Enrollment
- Open Enrollment Self-Service Guide Document provides step-by-step guidance in navigating State of Delaware Employee Self-Service
- **Spousal Coordination of Benefits Form Self-Service Guide** Document provides step-by-step guidance in navigating and completing the form
- **Health Plan Comparison Chart** Document provides a side-by-side comparison of the four health plans offered by the State of Delaware
- myBenefitsMentor® Online consumer decision tool that is designed to help you estimate upcoming healthcare expenses and make the best enrollment selection from the four health plans offered by the State of Delaware
- And More! Access plan booklets, highlights, rates, etc.

Q: Where can I find updates related to my benefits and COVID-19?

Statewide Benefits is your trusted source of information related to your health plan and other healthcare benefits. We, just like you, are worried about how the Coronavirus Disease (COVID-19) crisis will impact us and our families. And we want to help ease your concerns and questions about your health benefits and COVID-19. Information, resources and Frequently Asked Questions (FAQs) are being updated daily on our <u>website</u>. Please visit this site regularly for the latest information. If you have benefit-related questions that are not answered on our website, please submit your questions to <u>benefits@delaware.gov</u>.

Have questions related to leave, including Paid Emergency Leave (PEL) and COVID-19 in the workplace? These questions are important and we want you to get the right answers to your questions. If you are employed by a State of Delaware Agency, please read the <u>guidelines</u> issued by the Department of Human Resources. For all other organizations, please contact your organization's Human Resources office directly.



Q: Will I get Member ID Cards?

- Health: Members who enroll or change plans/tiers will receive new ID cards.
- Prescription: Only members who enroll in a health plan for the <u>first time</u> will receive prescription ID cards.
- Dental & Vision: Only NEW members will receive ID cards.
- Accident & Critical Illness: Securian Financial will issue a Certificate of Insurance to those who enroll.
- Group Universal Life Insurance: Securian Financial will send a confirmation enrollment letter.
- Flexible Spending Account (FSA): ASIFlex will send a confirmation enrollment statement.

Please Note: New Member ID Cards will be mailed mid to late June 2020.

Q: What will happen to my unused Aetna CDH Gold HRA funds at the end of the plan year?

For members who remain enrolled in the CDH Gold Plan Health Reimbursement Account (HRA), funds will rollover to the next plan year and are available at the beginning of the new plan year.

If you do not continue enrollment in a CDH Gold Plan the funds will be forfeited.

However, remaining unused funds will be used to pay for claims incurred during the period the employee was active in the CDH Gold Plan.

HRA Fund balances and status of claims may be obtained by contacting Aetna Customer Service at 1-877-542-3862 or **Aetna.com**.



Q: What do I need to provide if I am covering a spouse or other dependent for the FIRST TIME?

Proof of eligibility must be provided for anyone covering a spouse or dependent for the FIRST TIME.

- Proof of eligibility for a spouse is a copy of the Marriage Certificate/Civil Union Certificate.*
- Proof of eligibility for a dependent is a Birth Certificate or other legal document.*
- Social Security Card must be provided in order to confirm a spouse or dependent's Social Security Number.*
- Complete a **Dependent Child Coordination of Benefits** form if your dependent child has other health coverage.
- Complete a Certification of Tax Dependent Status form if covering a spouse due to civil union or other dependents due to civil union.*

Please contact your organization's Human Resources/Benefits Office to obtain information on how required supporting documentation should be submitted and with any questions.

Q: What do I need to do if I choose to cover my spouse for the 2020 Open Enrollment?

Review the Spousal Coordination of Benefits (SCOB) Policy and Chart before enrolling a spouse in health insurance coverage provided by the State of Delaware. You can access these documents on the SBO website by selecting your group and clicking "Spouse and Dependents."

Employees who cover their spouse on their State of Delaware Health Plan are required to complete a new Spousal Coordination of Benefits (SCOB) Form online through <u>State of Delaware Employee Self-Service</u> each year during Open Enrollment. *Note:* Only complete the online SCOB Form if you will be covering your spouse under a Highmark Delaware or Aetna Health Plan as of July 1, 2020.

Failure to submit a new form each year will result in a reduction of spousal health benefits.



^{*}This information is not forwarded to the carriers. Your organization's HR/Benefits Office will maintain this documentation.

Q: Who do I contact with questions/issues?

Do you have questions about completing the Open Enrollment steps? Having difficulty logging into State of Delaware Employee Self-Service (DE-SSO)? Don't know your Employee ID? Are you experiencing challenges with remoting into your PC or laptop or having issues with your internet browser or pop-up blocker? Don't have access to a computer, tablet or mobile device? Check out the Open Enrollment Help Desk Support chart for guidance on the appropriate resource that will best address your questions and issues.

Q: How will I confirm I actively participated in Open Enrollment?

If a preferred email is on file in <u>State of Delaware Employee Self-Service</u>, employees will receive an email confirming Open Enrollment selections were submitted and the employee actively participated, upon their completion of Benefits Enrollment. Benefit selections **WILL NOT** be provided in the email. *It is highly recommended the employee retain a copy of the confirmation email for their records*.

To review Benefit selections, employees must log into <u>State of Delaware Employee Self-Service</u>, select "State of Delaware Employee Self-Service", then "Benefits" and "Benefits Summary." Enter the date of **07/01/2020** and click "**Go.**" Benefit changes made in Benefits Enrollment <u>CANNOT</u> be viewed until the <u>following business day</u>. It is highly recommended the employee retain a copy of this screen for their records.

Q: Can I make corrections to my benefit selections after Open Enrollment ends?

Employees who notice an error on their Benefits Summary after Open Enrollment ends must contact their Human Resources/Benefits Office with the necessary changes no later than Friday, May 29, 2020.

Members who use services after the start of the plan year are prohibited from making a plan change unless they experience a qualifying event.

